



PATENT

AF 1648
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Xie et al.	Conf. No.:	3707
Serial No.:	10/509,293	Art Unit:	1648
Filed:	September 23, 2004	Examiner:	Chen, Stacy Brown
For:	METHODS OF VIRUS PRODUCTION	Attorney Docket No.:	21038P

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT UNDER 37 C.F.R. § 1.116

Sir:

In response to the final Office Action mailed August 3, 2007, Applicants respectfully request entry of the following amendments and consideration of the following remarks. Applicants submit herewith (1) an Amendment Fee Transmittal and (2) a Notice of Appeal from the Primary Examiner to the Board of Appeals and Patent Interferences. The Commissioner is authorized to charge Deposit Account 13-2755 for any Extension of Time and any other required fees.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

37 C.F.R. 1.8 Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450, on the date appearing below.

By Christine Rapacki
Christine Rapacki

MERCK & CO., INC.

Date November 2, 2007



PATENT
CASE NO. 21038P

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: LIANGZHI XIE ET AL.

Serial No. 10/509,293

Filed September 23, 2004

Group Art Unit 1648

Examiner Chen, Stacy Brown

For: METHODS OF VIRUS PRODUCTION

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>8</u>	-	** <u>20</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>2</u>	-	*** <u>4</u> =	<u>0</u> X	\$210	= <u>0.00</u>
Multiple Dependent Claims					\$370 ****	= <u> </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,

By: Henry P. Wu

Attorney for Applicant(s)

Reg. No. 44,412

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Date: November 2, 2007

IN DUPLICATE